06/13/2007 17:00

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#### **FEC** FORM 3X

#### REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Dental Political Action Committee 1111 14th Street, NW ADDRESS (number and street) Suite 1100 Check if different than previously Washington DC 20005 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00000729 Х REPORT OR (N) (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 05 0 1 2007 05 3 1 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Dr Roger Triftshauser Type or Print Name of Treasurer Electronically Filed by Dr Roger Triftshauser 06 13 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

#### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Dental Political Action Committee <sup>®</sup> D " D 0.5 0 1 2007 0.5 3 1 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 406004.72 <sup>°</sup>2007 January 1 (b) Cash on Hand at 627293.56 Begining of Reporting Period ..... 63777.87 661290.20 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 691071.43 1067294.92 6(a) and 6(c) for Column B) ..... 133160.43 509383.92 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 557911.00 557911.00 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) ..... 0.00 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

#### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

American Dental Political Action Committee

Report Covering the Period:

м м 0 5

From:

01

<sup>Y</sup> 2007

o. 05

<sup>D</sup> 3 1

2007

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. C	ontributions (other than loans) From:  ) Individuals/Persons Other		
(6	Than Political Committees (i) Itemized (use Schedule A)	8065.00	23215.00
	(ii) Unitemized	46314.40	361030.74
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	54379.40	384245.74
(b	) Political Party Committees	0.00	0.00
(c	(such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	54379.40	384245.74
	ransfers From Affiliated/Other arty Committees	9175.15	276074.47
13. A	Il Loans Received	0.00	0.00
	pan Repayments Receivedffsets To Operating Expenditures	0.00	0.00
(C	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
to	Federal candidates and Other olitical Committees	0.00	0.00
	ther Federal Receipts Dividends, Interest, etc.)	223.32	969.99
	ransfers from Non-Federal and Levin Funds		
(;	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(1	b) Levin Funds (from Schedule H5)	0.00	0.00
(0	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	63777.87	661290.20
	otal Federal Receipts ubtract Line 18(c) from Line 19)	63777.87	661290.20

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:     (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating  Expenditures	160.43	616.43
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii) and (b))	160.43	616.43
2. Transfers to Affiliated/Other Party  Committees	0.00	0.00
Contributions to Federal Candidates/Committeesand Other Political Committees	133000.00	507600.00
. Independent Expenditure (use Schedule E)	0.00	0.00
Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
. Other Disbursements	0.00	1167.49
Federal Election Activity (2 U.S.C 431(20))     (a) Shared Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,	100100 40	500000 00
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	133160.43	509383.92
. Total Federal Disbursements		
(subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	133160.43	509383.92
ITOTT LINE 31)	133100.43	309363.92

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	54379.40	384245.74
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	54379.40	384245.74
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	160.43	616.43
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures     (subtract Line 37 from Line 36)	160.43	616.43

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Dental Political Action Commi	ttee		
۹.	Full Name (Last, First, Middle Initial) Dr Bernard J Larson  Mailing Address # B 887 W North Beach Rd			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 3896628
	Bow  FEC ID number of contributing federal political committee.	C	98232	Amount of Each Receipt this Period 500.00
	Name of Employer self-employed  Receipt For:  Primary General  Other (specify) ▼	Occupation dentist Aggregate	e Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Mr. Wayne McMahan  Mailing Address Alabama Dental Associa 836 Washington Street	tion		Date of Receipt    M
	City	State	Zip Code	Transaction ID: 3896629
	Montgomery  FEC ID number of contributing federal political committee.	C	36104	Amount of Each Receipt this Period 500.00
	Name of Employer Alabama Dental Assoc	Occupation Executive	n e Director	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
<b>-</b> C.	Full Name (Last, First, Middle Initial) Dr Colin A Malaker			Date of Receipt
	Mailing Address 1731 Parkwood Dr			05 / 01 / 4 7 7 7
	City Moberly	State MO	Zip Code 65270-3255	Transaction ID: 3896630  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupation dentist	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)			1500.00
т.	OTAL This Period (last page this line number or	lv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/39
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
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or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	American Dental Political Action Comm	ittee		
Α.	Full Name (Last, First, Middle Initial) Dr Lana R Schlecht			Date of Receipt
	Mailing Address PO Box 247			05 01 7 2007
	City	State	Zip Code	Transaction ID: 3896636
	Ellendale	ND	58436-0247	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupation dentist	1	
	Receipt For:		Year-to-Date ▼	
	Primary General		500.00	
	Other (specify) ▼	0 0	500.00	
В.	Full Name (Last, First, Middle Initial) Dr Allan Jacobs			Date of Receipt
	Mailing Address 4868 Fairway Rdg S			05 01 7 2007
	City	State	Zip Code	Transaction ID: 3896644
	W Bloomfield	MI	48323-3314	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer self- employed	Occupation dentist	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	300.00	
<u> </u>	Full Name (Last, First, Middle Initial) Dr Blane R Christman			Date of Receipt
٠.	Mailing Address PO Box 408			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 3896645
	Ladysmith	WI	54848-0408	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupation dentist	١	
	Receipt For:		Year-to-Date ▼	7
	Primary General			1
	Other (specify)		500.00	
s	UBTOTAL of Receipts This Page (optional)			1300.00
$\vdash$	. 3 (1 37			

TOTAL This Period (last page this line number only) .....

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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 39
ITEMIZED RECEIPTS		2 See Separate Seriedale(S)		(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	y not be sold or used by any pers	on for the purpose of soliciting contributions
7	NAME OF COMMITTEE (In Full)	arric aria aa	dress or any political committee to	5 Solicit Contributions from Sacri Committee.
	American Dental Political Action Comm	ittee		
Α.	Full Name (Last, First, Middle Initial) Dr Thomas Danner Pollard			Date of Receipt
	Mailing Address 9138 NW McKenna Dr	05 01 2007		
	City	State	Zip Code	Transaction ID: 3896648
	Portland	OR	97229-8038	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupatio dentist	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
В.	Full Name (Last, First, Middle Initial) Dr Michael C Griffiths			Date of Receipt
	Mailing Address 1920 Irving St Ne			05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 3896649
	Washington	<u>DC</u>	20018-2430	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer self-employed	Occupatio dentist	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Dr Akram E Rafla			Date of Receipt
	Mailing Address 60 Buckskin Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 3896650
	Weston	MA	02493-1130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer self-employed	Occupatio dentist	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	-	500.00	7
	Other (specify) 🔻	0 0	300.00	_
s	UBTOTAL of Receipts This Page (optional)			1500.00

TOTAL This Period (last page this line number only) .....

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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9/39
IT	EMIZED RECEIPTS		or each category of the	(check only one)
11	EIVIIZED NECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
			,	13 14 15 16 17
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		· · · · · · · · · · · · · · · · · · ·	
	American Dental Political Action Comm	ittee		
Α.	Full Name (Last, First, Middle Initial) Dr. Marta Rafla			Date of Receipt
	Mailing Address 250 Commercial Street Suite 430			05 01 7 2007
	City	State	Zip Code	Transaction ID: 3896651
	Worcester	MA	01608-1726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self-employed	Occupation dentist	n	
	Receipt For:    Primary   General	Aggregate	e Year-to-Date ▼	1
	Other (specify) ▼		250.00	
В.	Full Name (Last, First, Middle Initial) Dr Jeffrey Ganeles			Date of Receipt
	Mailing Address 2365 NW 46th St			05 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 3896652
	Boca Raton	FL	33431-8425	Amount of Each Receipt this Period
				Talloant of East Hoodpt this I dried
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self-employed	Occupation dentist	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify)		500.00	
				A Company of the Comp
C.	Full Name (Last, First, Middle Initial) Dr Bradley S Trotter			Date of Receipt
	Mailing Address 502 N. 6th Avenue			05 01 YYYY 2007
	City	State	Zip Code	Transaction ID: 3896653
	Hopewell	VA	23860-2619	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer self-employed	Occupation dentist	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional)			1250.00
1	. 3 (1)			

TOTAL This Period (last page this line number only) .....

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 39	
	EMIZED RECEIPTS		or each category of the	(check only one)	
••			Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17	
Δr	w information copied from such Reports and S	tatements may	ynot he sold or used by any ners		
or	y information copied from such Reports and S for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.	
$\setminus$	NAME OF COMMITTEE (In Full)				
	American Dental Political Action Comr	nittee			
A.	Full Name (Last, First, Middle Initial) Dr Michael Parry Evans			Date of Receipt	
	Mailing Address 1859 Loma Linda St			05 01 2007	
	City	State	Zip Code	Transaction ID: 3896654	
	Sarasota	FL	34239-2206	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer self-employed	Occupation dentist	n		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		225.00	7	
	Other (specify) ▼		0 0 0 0 0 0 0		
В.	Full Name (Last, First, Middle Initial) Dr John Floyd Harrington, Jr			Date of Receipt	
	Mailing Address 274 Nelson Rd NW			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	
	City	State	Zip Code	Transaction ID: 3896707	
	Milledgeville	GA	31061-9787	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer self-employed	Occupation dentist	n		
	Receipt For:		e Year-to-Date ▼		
	Primary General	00 0		7	
	Other (specify) ▼		500.00		
C.	Full Name (Last, First, Middle Initial) Dr David C Averill			Date of Receipt	
	Mailing Address 324 Pearl St			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O	
	City	State	Zip Code	Transaction ID: 3897010	
	Burlington	VT	05401-8531	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
Name of Employer self-employed  Receipt For:		Occupation dentist	n		
			e Year-to-Date ▼		
	Primary General		500.00	7	
	Other (specify) ▼		500.00		
s	UBTOTAL of Receipts This Page (optional)			1025.00	
$\vdash$	. 5 (, ,		<u> </u>		
т	OTAL This Period (last page this line number	only)			

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11/39
IT	EMIZED RECEIPTS		or each category of the	(check only one)  X 11a 11b 11c 12
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
An	y information copied from such Reports and Star for commercial purposes, other than using the na	tements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
<u> </u>	NAME OF COMMITTEE (In Full)	arrie ariu auc	diess of any political committee to	Solicit Contributions from Such Committee.
$\rangle$	American Dental Political Action Commi	ttee		
۹.	Full Name (Last, First, Middle Initial) Dr Robert A Hersh			Date of Receipt
	Mailing Address 507 Stillwells Corner Ro	ad		05 / 07 / 4 2007
	City	State	Zip Code	Transaction ID: 3897014
	Freehold	NJ	07728-2965	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer self-employed	Occupation dentist	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	
	Other (specify) ▼		0 0 0 0 0 0	
3.	Full Name (Last, First, Middle Initial) Ms. Kathleen B. Ford			Date of Receipt
	Mailing Address 1111 14th Street, NW, S	05 07 2007		
	City	State	Zip Code	Transaction ID: 3897017
	Washington	DC	20005-5627	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer American Dental Associati- on	Occupation PAC Dire		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	
	Other (specify) ▼		300.00	
Э.	Full Name (Last, First, Middle Initial) Dr David S Wilbanks			Date of Receipt
	Mailing Address 200 Thunderbird Drive			05 7 7 2007
	City	State	Zip Code	Transaction ID: 3897021
	El Paso	TX	79912-3904	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self-employed	Occupation dentist	1	
	Receipt For:	l	Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify)		230.00	
SI	UBTOTAL of Receipts This Page (optional)			1250.00
T	OTAL This Period (last page this line number or	ıly)	<b>)</b>	

#### **SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS**

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

FEC ID number of contributing

federal political committee.

Other (specify)

Mailing Address 4501 S Staples St

A. Dr Frederick T Philips, Jr

Corpus Christi

Name of Employer self-employed

Primary

Receipt For:

City

American Dental Political Action Committee

General

TX

C

Aggregate Year-to-Date ▼

240.00

FOR LINE NUMBER: PAGE 12/39 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. Date of Receipt 0 5 21 2007 State Zip Code Transaction ID: 3911323 78411-2627 Amount of Each Receipt this Period 240.00 Occupation dentist

		040.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	240.00
TOTAL This Period (last page this line number only)	<b>•</b>	8065.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 13 / 39 (check only one)
-			Detailed Summary Page	13 14 15 16 17
Ar or	ly information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<u> </u>	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
$\rangle$	American Dental Political Action Commit	ttee		
۹.	Full Name (Last, First, Middle Initial) Tennessee Dental PAC			Date of Receipt
	Mailing Address PO Box 120188 2104 Sunset Place			05 07 2007
	City	State	Zip Code	Transaction ID: 3897027
	Nashville	TN	37212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer	Occupation	٦	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		23636.00	]
	Other (specify)	0 0	0 0 0 0 0 0 0	1
3.	Full Name (Last, First, Middle Initial) California Dental PAC			Date of Receipt
	Mailing Address PO Box 13749			05 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 3897033
	Sacramento	CA	95853	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		506.68
	Name of Employer	Occupation	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		33898.00	
).	Full Name (Last, First, Middle Initial) New Jersey Dental PAC			Date of Receipt
	Mailing Address One Dental Plaza PO Box 6020			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 3897035
	North Brunswick	NJ	08902	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1050.00
	Name of Employer	Occupation	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	12810.00	1
	Other (specify) ▼		12010.00	1
s	UBTOTAL of Receipts This Page (optional)			2556.68
Т	OTAL This Period (last page this line number on	ly)		
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٥/	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 14/39
	•		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	11a 11b 11c X 12
			Detailed Summary Fage	13 14 15 16 17
An	y information copied from such Reports and State	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full)			
$\rangle$	American Dental Political Action Commit	tee		
	Full Name (Last, First, Middle Initial)			
۹.	New Jersey Dental PAC			Date of Receipt
	Mailing Address One Dental Plaza			M M / D D / Y Y Y Y
	PO Box 6020			05 21 2007
	City	State	Zip Code	Transaction ID: 3911309
	North Brunswick	NJ	08902	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		120.00
	Name of Employer	Occupation	1	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General	Aggregate	Flear-to-Date V	
	Other (specify)		12930.00	
				1
3.	Full Name (Last, First, Middle Initial) Indiana Dental PAC			Date of Receipt
	Mailing Address PO Box 2467			M M / D D / Y Y Y Y
				05 21 2007
	City	State	Zip Code	Transaction ID: 3911315
	Indianapolis	IN	46206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		210.00
	rederal political committee.			
	Name of Employer	Occupation	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	Aggregate	Teal to Bate V	
	Other (specify)		11285.00	
				1
	Full Name (Last, First, Middle Initial)			2. (2. )
J.	California Dental PAC			Date of Receipt
	Mailing Address PO Box 13749			05 21 2007
	City	State	Zip Code	Transaction ID: 3911317
	Sacramento	CA	95853	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		1757.47
	Name of Employer	Occupation	1	
		_	<u> </u>	
	Receipt For:	Aggregate	Year-to-Date ▼	. [
	Primary General Other (specify) ▼	' '	35655.47	
	Othor (specify)	0 0		
	L			2087.47
S	JBTOTAL of Receipts This Page (optional)		······	2001.41
T	OTAL This Period (last page this line number onl	y)		

SI	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 15/39
			Use separate schedule(s) or each category of the	(check only one)	
П	EMIZED RECEIPTS		Detailed Summary Page	11a 11b	11c X 12
				13 14	15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of solic solicit contributions from	iting contributions such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)				
$\rangle$	American Dental Political Action Commi	ttee			
۸.	Full Name (Last, First, Middle Initial) Military			Date of Receipt	
	Mailing Address ADA-Chicago 211 E. Chicago Avenue			05 / 21	2007
	City	State	Zip Code	Transaction ID: 39	
	Chicago	<u> </u>	60611	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	С			1171.00
	Name of Employer	Occupation	1		
	Receipt For:	L Aggregate	Year-to-Date ▼		
	Primary General			1	
	Other (specify)		5783.00		
3.	Full Name (Last, First, Middle Initial) New York State Dental PAC			Date of Receipt	
	Mailing Address 121 State Street 4th Floor			05 / 21	2007
	City	State	Zip Code	Transaction ID: 39	911319
	Albany	NY	12207	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			3320.00
	Name of Employer	Occupation	1		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		127505.00	1	
	Other (specify) ▼	0 0	127303.00		
Э.	Full Name (Last, First, Middle Initial) Indiana Dental PAC			Date of Receipt	
	Mailing Address PO Box 2467		7.0	05 21	2007
	City Indianapolis	State IN	Zip Code	Transaction ID: 39	
	•	IIN	46206	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			40.00
	Name of Employer	Occupation	1		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		11225.00	1	
	Other (specify) ▼	0 0	11325.00		
s	UBTOTAL of Receipts This Page (optional)				4531.00
	· · · · · · · · · · · · · · · · · · ·			-	9175.15
T	OTAL This Period (last page this line number on	ıly)	<b>)</b>		91/0.10

FOR LINE NUMBER: PAGE 16/39 Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 **X** 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Dental Political Action Committee Full Name (Last, First, Middle Initial) Citibank 1 Date of Receipt Mailing Address 1500 Vermont Ave Nw 2007 0 5 31 City Zip Code State Transaction ID: 3921159 Washington DC 20005 Amount of Each Receipt this Period FEC ID number of contributing C 223.32 federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 969.99 Other (specify)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	223.32
TOTAL This Period (last page this line number only)	•	223.32

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50	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER: PAGE 17/39
IT	EMIZED DISBURSEMENTS	for each category of the	(check onl	
		Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
	y Information copied from such Reports and State for commercial purposes, other than using the nar		, , ,	
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	American Dental Political Action Commit	ee		
	Full Name (Last, First, Middle Initial)			Transaction ID: 3921163
٩.	Citibank 1			Date of Disbursement
	Mailing Address 1500 Vermont Ave Nw			05 7 3 1 7 2 0 0 7
	City	State Zip Code		Amount of Each Disbursement this Period
	Washington	DC 20005		100.40
	Purpose of Disbursement		001	160.43
	Candidate Name		Category/ Type	
	Office Sought: House Disburs	ement For:		
	Senate	Primary General		
	President	Other (specify)		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)	•	160.43
TOTAL This Period (last page this line number only)	<u> </u>	160.43

TEMES DISPURSEMENTS	Use seperate schedule(s)		heck or	= INOIVIDE ily one)	n.		PF	NGE	16/3	9	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	$\blacksquare$	:3 :8b	24 28c	H	25 29		26 30b
Any Information copied from such Reports and State										5	
or for commercial purposes, other than using the nar	ne and address of any political co	ornimi	itee to s	Olicit conti	ributioi	is iro	m such d	comm	ııttee		
NAME OF COMMITTEE (In Full)  American Dental Political Action Commit	ee										
Full Name (Last, First, Middle Initial)				Trans	actio	n ID:	389627	<b>'</b> 4			
Democratic National Committee					of Disl						
Mailing Address 430 S. Capitol St., SE				0 <sup>M</sup> 5	M /	<sup>D</sup> 0	3 /	ž	0 Ď 7	Y	
City	State Zip Code			Amou	ınt of E	Each I	Disburse	ement	this P	erioc	Ī
Washington	DC 20003						-	15	000.0	00	П
Purpose of Disbursement 2007 Membership Dues		01	1								_
Candidate Name		Cate									
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)			2007	Mem	bersl	nip Due	es			
Full Name (Last, First, Middle Initial)				Trans	antin	n ID:	389627	'6			
B. Democratic National Committee				Date	of Dist	ourse	ment		Υ .	Υ	
Mailing Address 430 S. Capitol St., SE				0 <sup>M</sup> 5		0	3 1	2	0 Ď 7		
City Washington	State Zip Code DC 20003			Amou	int of E	Each I	Disburse	ement	this P	erioc	
Purpose of Disbursement Void - Democratic National Committee	Γ	01	1	L.				-15	0.000	00	_
Candidate Name		Cate Ty	gory/ oe								
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)			Void - Comr	- Dem	nocra	itic Nati	iona	l		
Full Name (Last, First, Middle Initial)											
Democratic National Committee				1	of Dist		389627 ment		V	V	
Mailing Address 430 S. Capitol St., SE				0 5		0	3	2	0 ŏ 7		
City Washington	State Zip Code DC 20003			Amou	ınt of E	Each I	Disburse	-		-	
Purpose of Disbursement 2007 Memership Dues	Г	01	1	L.				15	0.000	00	_
Candidate Name		Cate	gory/								
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)			2007	Mem	ershi	p Dues	;			
SUBTOTAL of Disbursements This Page (optional			_					150	0.00	0	$\overline{}$
CODICIAL OF DISDUISEMENTS THIS FAGE (OPHONIAL				-	-	-		-		-	=
<b>TOTAL</b> This Period (last page this line number only	)		•								

	CHEDULE B (FEC Form 3X)	Use sep	erate schedule(s)					NUMBE	R:			F	PAGE	19/	39	
IT _	EMIZED DISBURSEMENTS	for each	category of the Summary Page		F	check 21b 27	ŕ	one) 22 28a	Х	23 28b	<u> </u>	24 280	<u>.</u> [	25 29	$\square$	26 30b
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam														ns	
K	NAME OF COMMITTEE (In Full)		<b>,</b>													
$ \rangle$	American Dental Political Action Committee	ee														
Α.	Full Name (Last, First, Middle Initial) Friends Of Byron Dorgan							Trans Date		-	_		60			
	Mailing Address PO Box 871							0 <sup>M</sup> 5	М	/ [	0 6	/	Y	ž 0 Ŏ	7 <sup>Y</sup>	
	City Bismarck	State ND	Zip Code 58502					Amou	ınt o	f Ead	ch D	isburs	seme	nt this	Period	_
	Purpose of Disbursement Judy Sherman attending event/check to ca			Γ	0	11	]					•		1000.	00	
	Candidate Name Sen. Byron L. Dorgan			С		egory/ ype										
	• 🗎 –	ement For: Primary Other (spe	2010 General ecify)					Judy ent/cl	She necl	erma k to	an a can	ttenc ipaig	ling ( In	ev-		
	State: ND District: 2															
В.	Full Name (Last, First, Middle Initial) Wynn For Congress							Trans Date	of D	isbu	rsem	ent		v · v	V	
	Mailing Address P.O. Box 39139							0 5	М	/ L	0 6		· 2	ž 0 Ŏ	7 1	
	City Washington	State DC	Zip Code 20016					Amou	ınt o	f Ea	ch D	isburs		nt this		$\overline{}$
	Purpose of Disbursement Katie Yehl attending event/check sent to					11		L.	0			•		1000.	00	_
	Candidate Name Rep. Albert Russell Wynn			C		egory/ ype										
		ement For: Primary Other (spe	2008 General					Katie t/ched	Yel ck s	hl at ent	tenc to c	ding ( ampa	even aign	-		
	State: MD District: 4															
C.	Full Name (Last, First, Middle Initial) Steve Chabot For Congress							<b>Trans</b> Date	of D	isbu	rsem	ent				
	Mailing Address 3339 Harrison Ave. 3014 Harrison Ave.							0 <sup>M</sup> 5	М	/ L	0 6		Ý 2	ž 0 Ŏ	7 <sup>*</sup>	
	City Cincinnati	State OH	Zip Code 45211					Amou	ınt o	f Ea	ch D	isburs		nt this 3000.		$\overline{}$
	Purpose of Disbursement 3 Ohio dentists attended 4/30 event at V  Candidate Name				_	11			0			•		3000.	00	_
	Rep. Steve Chabot	ement For:	2008	C		egory/ ype										
		Primary Other (spe	General					3 Ohi 4/30 ( ter	o d eve	entis nt af	sts a t Ve	atteno rizon	ded Cer	1-		
s	UBTOTAL of Disbursements This Page (optional)					. 1	•					-		5000.	00	7
	OTAL This Period (last page this line number only)					<u>`</u>	_							-		ī

	and address of any political	21k 27 d by any pers	28a 28b 28c 29 30  con for the purpose of solicating contributions to solicit contributions from such committee  Transaction ID: 3896353  Date of Disbursement
for commercial purposes, other than using the name  NAME OF COMMITTEE (In Full)  American Dental Political Action Committee  Full Name (Last, First, Middle Initial)  Pastor for Congress  Mailing Address 802 North 3rd Avenue  City S Phoenix A  Purpose of Disbursement Judy Sherman attended event/check sent t  Candidate Name	and address of any political		Transaction ID: 3896353 Date of Disbursement
NAME OF COMMITTEE (In Full) American Dental Political Action Committee Full Name (Last, First, Middle Initial) Pastor for Congress  Mailing Address 802 North 3rd Avenue  City S Phoenix Purpose of Disbursement Judy Sherman attended event/check sent t Candidate Name	•	committee to	Transaction ID: 3896353 Date of Disbursement
Full Name (Last, First, Middle Initial) Pastor for Congress  Mailing Address 802 North 3rd Avenue  City S Phoenix Purpose of Disbursement Judy Sherman attended event/check sent t  Candidate Name			Date of Disbursement
Full Name (Last, First, Middle Initial) Pastor for Congress  Mailing Address 802 North 3rd Avenue  City S Phoenix A  Purpose of Disbursement Judy Sherman attended event/check sent t  Candidate Name			Date of Disbursement
Pastor for Congress  Mailing Address 802 North 3rd Avenue  City S Phoenix A  Purpose of Disbursement Judy Sherman attended event/check sent t  Candidate Name	stata Zin Coda		Date of Disbursement
Mailing Address 802 North 3rd Avenue  City S Phoenix A  Purpose of Disbursement Judy Sherman attended event/check sent t  Candidate Name	stata Zin Coda		
City Phoenix Purpose of Disbursement Judy Sherman attended event/check sent t Candidate Name	state Zin Code		M M / D D / Y Y Y
Phoenix Purpose of Disbursement Judy Sherman attended event/check sent t Candidate Name	state Zin Code		05 0 6 7 2 0 0 7
Purpose of Disbursement Judy Sherman attended event/check sent t Candidate Name			Amount of Each Disbursement this Period
Judy Sherman attended event/check sent t  Candidate Name	AZ 85003		1000.00
		011	
		Category/ Type	
	nent For: 2008 Primary General Other (specify)		Judy Sherman attended eve- nt/check sent to campaign
Full Name (Last, First, Middle Initial)			
Lucille Roybal-Allard For Congress			Transaction ID: 3896357 Date of Disbursement
Mailing Address P.O. Box 582			05 06 7 2007
•	itate Zip Code MD 20895		Amount of Each Disbursement this Period
Purpose of Disbursement Judy Sherman attending event/check to ca		011	1000.00
Candidate Name Rep. Lucille Roybal-Allard		Category/ Type	
	nent For: 2008 Primary General Other (specify)		Judy Sherman attending ev- ent/check to campaign
Full Name (Last, First, Middle Initial)			Transaction ID: 3896356
Renzi for Congress			Date of Disbursement
Mailing Address P.O. Box 219			05 06 7 2007
	itate Zip Code AZ 86002		Amount of Each Disbursement this Period
Purpose of Disbursement Judy Sherman attending event/check to ca		011	1000.00
Candidate Name Rick Renzi		Category/ Type	
President	nent For: 2008 Primary General Other (specify)		Judy Sherman attending ev- ent/check to campaign
State: AZ District: 1			2000 20
SUBTOTAL of Disbursements This Page (optional)			3000.00

	CHEDULE B (FEC Form 3X)	Use sepe	erate schedule(s)			OR LI		NUMBE	R:			Р	AGE	21 /	39
IT	EMIZED DISBURSEMENTS		category of the Summary Page		Ĺ	21b 27	ŕ	22 28a	Х	23 28b		24 280	<u> </u>	25 29	26
	y Information copied from such Reports and Statem for commercial purposes, other than using the name														is
$\vdash$	NAME OF COMMITTEE (In Full)		71												
$ \rangle$	American Dental Political Action Committee	ee													
Α.	Full Name (Last, First, Middle Initial) Dirigo PAC							<b>Trans</b> Date	of D	isbu	sem	ent	52		
	Mailing Address PO Box 1355							0 <sup>M</sup> 5	М	/ [	0 6	/	Ý	Ý 0 Ŏ	7 <sup>Y</sup>
	City Alexandria	State VA	Zip Code 22313					Amou	ınt o	f Ead	ch Di	isburs	emer	nt this	Period
	Purpose of Disbursement Judy Sherman on steering committee/will			Γ	0	11	]	L.		-				5000.	00
	Candidate Name			С		egory/ ype									
	Senate President	ement For: Primary Other (spe	General ecify) ▼					Judy comn ure e	nitte	e/w	an o ill at	n ste ttend	ering fut-	)	
	State: District: Full Name (Last, First, Middle Initial)							Trans	sact	ion I	D: 38	8963	58		
В.	Demint For Senate Committee Inc							Date			sem	ent		2 o ŏ :	Y
	Mailing Address PO Box 12425	0						0.5	_		0 6				
	Columbia	State SC	Zip Code 29211					Amou	ınt o	of Eac	ch Di	isburs		nt this 1000.	
	Purpose of Disbursement Kathleen Ford attending event/check to c Candidate Name					11								1000.	00
	Sen. James W. DeMint			C		egory/ ype									
	X Senate X President	ement For: Primary Other (spe	2008 General					Kathlevent	een /ch	For eck	d at to ca	tendi ampa	ng lign		
	State: SC District: 2 Full Name (Last, First, Middle Initial)														
C.	Searchlight Leadership Fund Committee							Trans Date	of D	isbuı	sem	ent			V
	Mailing Address 422 C St., NE Lower Level							0 5	М	/ [	0 6		` 2	Ý 0 Ŏ	7
	City Washington	State DC	Zip Code 20002					Amou	ınt o	f Ead	ch Di	isburs	-		Period
	Purpose of Disbursement Judy Sherman attending event/check to le				0	11		L.						5000.	00
	Candidate Name			С		egory/ ype									
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General <b>▼</b>					Judy ent/cł pac	She necl	erma k to	an a' leac	ttend lersh	ing e ip	ev-	
[	1								_			•	11	000.	00
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SCHEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s	)		OR LINE neck only		n.			PAG	E 22/	39
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	Х	23 28b	$oldsymbol{\sqcup}$	24 [ 28c [	25 29	26 30b
Any Information copied from such Reports and State											
or for commercial purposes, other than using the name	ne and address of any politica	l comr	mitt	ee to soli	cit conti	ributi	ons tr	om su	ich cor	nmittee	
NAME OF COMMITTEE (In Full)  American Dental Political Action Committ	00										
American Dental Folitical Action Committee	<del>ee</del>										
Full Name (Last, First, Middle Initial)  A. Kagen 4 Congress							on ID:				
A. Kagen 4 Congress						of Di м	sburs		t v v	YY	Υ
Mailing Address 100 West Lawrence St					0 5		C	6	L.	žoŏ	7
City	State Zip Code				Amou	ınt o	Each	Disb	ursem	ent this	Period
Appleton Purpose of Disbursement	WI 54911					-				1000	.00
Judy Sherman attending event/check to ca			01	1			_		•		
Candidate Name Steven Kagen			teg Typ	ory/ e							
X · · · · · · ·	ement For: 2008 Primary General				Judy	Shẹ	rman	atte	ṇding	ev-	
President	Other (specify)				ent/cl	neck	to ca	ampa	aign		
State: WI District: 8											
Full Name (Last, First, Middle Initial)  B. Green Mountain PAC					Trans						
Green Mountain PAC						of Di	sburs		! / Y	YY	Υ
Mailing Address 10 G Street, NE Suite 470					0 5			6	L.	žoŏ	7
City Washington	State Zip Code DC 20002				Amou	ınt o	Each	Disb	ursem	ent this	Period
Purpose of Disbursement	20002			-						2500	.00
Judy Sherman attending event/check sent			01								
Candidate Name		I	iteg Typ	ory/ e							
Office Sought: House Disburs	ement For:				ludv	Sho	rman	atto	ndina	OV-	
Senate	Primary General				Judy ent/ch hip P	neck	sent	to le	aders	S-	
State: President State:	Other (specify) ▼				прг	AC					
Full Name (Last, First, Middle Initial)					Trans	sacti	on ID:	: 389	7038		
C. Senate Majority Fund						_	sburs		t		
Mailing Address 507 Capitol Court NE #100					0 5	М		8	Y	ž 0 ŏ	7 <sup>Y</sup>
City Washington	State Zip Code DC 20002				Amou	ınt o	Each	Disb	ursem	ent this	Period
Purpose of Disbursement Kathleen Ford attending event			01			_				5000	.00
Candidate Name		Ca	-	ory/							
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	•			Kathle event		Ford	atter	nding		
State: District:	_ Caron (opcomy) \										
SUBTOTAL of Disbursements This Page (optional)				<b>•</b>						8500.	00
TOTAL This Period (last page this line number only	)										

SCHEDOLL B (I LCI OIII 3X)	Use seperate schedule(s)	(check only	NUMBER:	PAGE 23/39
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 28a 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)	no and address of any political co	minutee to So	non continuutions mont s	Such Committee
American Dental Political Action Commi	ree			
Full Name (Last, First, Middle Initial)			Transaction ID: 389	97356
Culberson For Congress			Date of Disburseme	
Mailing Address P.O. Box 41964			05	<sup>Y</sup> 2007 <sup>Y</sup>
City Houston	State Zip Code TX 77241		Amount of Each Dis	bursement this Period
Purpose of Disbursement		• •		1000.00
check sent to Dr. Tommy Harrison  Candidate Name		011 Category/		
Rep. John Abney Culberson		Type		
Office Sought:  X House Senate President State: TX District: 7	sement For: 2008  K Primary General  Other (specify)		check sent to Dr. Harrison	Tommy
Full Name (Last, First, Middle Initial)			Transaction ID: 200	01000
3. Andrews For Congress Committee			Transaction ID: 390 Date of Disburseme	nt
Mailing Address 215 Fourth Avenue Suite 200			0 5 1 4	2007
City Haddon Heights	State Zip Code NJ 08035		Amount of Each Dis	bursement this Period
Purpose of Disbursement Jennifer Fisher to attend event/check se	lΓ	011		1000.00
Candidate Name Rep. Robert E. Andrews		Category/ Type		
X	sement For: 2008  C Primary General  Other (specify)		Jennifer Fisher to event/check sent t ign	
Full Name (Last, First, Middle Initial)  Bartlett For Congress			Transaction ID: 390 Date of Disburseme	
Mailing Address PO Box 280 PO Box 3662			05 14	2007
City Buckeystown	State Zip Code MD 21717		Amount of Each Dis	bursement this Period
Purpose of Disbursement check sent to Dr. Peter Tan		011		2000.00
Candidate Name Roscoe Bartlett		Category/ Type		
Office Sought:  X House Senate President State: MD District: 6	sement For: 2008  ✓ Primary General  Other (specify) ▼	,	check sent to Dr. Tan	Peter
SUBTOTAL of Disbursements This Page (optional	)			4000.00
TOTAL This Period (last page this line number on	/)			

S	CHEDULE B (FEC Form 3X)	Use seper	rate schedule(s)			NUMBER	ጓ:	P	AGE 24/	39
IT	EMIZED DISBURSEMENTS		ategory of the summary Page		(check on 21b 27	22 28a	X 23 28b	24 28c	25 29	26 30b
	y Information copied from such Reports and S for commercial purposes, other than using the									
<u> </u>	NAME OF COMMITTEE (In Full)	Traine and address	o or any pontious			511011 0011111		10111 00011		
$\rangle$	American Dental Political Action Com	mittee								
Α.	Full Name (Last, First, Middle Initial)							<b>)</b> : 390108	34	
Λ.	Committee For Pete V. Domenici					M	of Disburs		Y Y Y	Y
	Mailing Address PO Box 93656					0 5	J L	14	žoŏ	7
	City Albuquerque	State NM	Zip Code 87199			Amour	nt of Eac	h Disburse	ement this	Period
	Purpose of Disbursement check sent to Dr. Keigm Crook				044	<u> </u>			2500	.00
	Candidate Name				011 tegory/					
	Pete Domenici				Гуре					
	χ Senate President	bursement For:  X Primary Other (spec	2008 General			check Crook		Dr. Keig	m	
_	State: NM District: 1									
В.	Full Name (Last, First, Middle Initial) Westmoreland For Congress						action IC of Disburs	9: 390109 sement	92	
	Mailing Address P.O. Box 458					0.5	M / D	14	žoŏ	7 <sup>Y</sup>
	City Sharpsburg	State GA	Zip Code 30277			Amour	nt of Eac	h Disburse	ement this	Period
	Purpose of Disbursement Jennifer Fisher will attend event/check			Г	011	<u> </u>			1000	.00
	Candidate Name Rep. Lynn A. Westmoreland			Ca	tegory/ Type					
	Senate President	bursement For:  X Primary Other (spec	2008 General			Jennif nd eve mpaig	ent/chec	er will att ck sent to	e- o ca-	
	State: GA District: 3 Full Name (Last, First, Middle Initial)									
C.	Kilpatrick For US Congress					Date o	of Disbure			
	Mailing Address PO Box 32175					0.5	M / D	1 4 /	ŽOĎ	7 <sup>Y</sup>
	City Detroit	State MI	Zip Code 48232			Amour	nt of Eac	h Disburse	ement this	Period
	Purpose of Disbursement Jennifer Fisher will attend event/check				011	[ L.			1500	.00
	Candidate Name Carolyn Kilpatrick			Ca	tegory/ Type					
	Senate President	bursement For:  X Primary Other (spec	2008 General		••		ent/chec	er will att ck sent to		
	State: MI District: 13									
s	UBTOTAL of Disbursements This Page (option	onal)		·····	<b>•</b>				5000	.00
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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21I 27		. ′ —	X 23 28b	24 28c	П	25 29	26
Any Information copied from such Reports and State or for commercial purposes, other than using the na									_
	le and address of any political co	ommittee t	) SOIIC	il Contrib	ulions in	om such	COIIII	iiilee	
NAME OF COMMITTEE (In Full)  American Dental Political Action Commit	ee								
Full Name (Last, First, Middle Initial)				Transac	ction ID:	390108	39		
Scott For Congress Committee					Disburse		.,,	· V	V
Mailing Address PO Box 261				0 <sup>M</sup> 5 M	/ <b>1</b>	<sup>D</sup> /	ž	0 ŏ 7	Y
City Novement Nove	State Zip Code VA 23607			Amount	of Each	Disburse	ement	this P	eriod
Newport News Purpose of Disbursement	VA 23607						5	0.00	0
check sent to Dr. McKinley Price		011					-	-	
Candidate Name Robert Scott		Category/ Type							
X	ement For: 2008  Primary General  Other (specify)			check s Price	ent to [	Or. McK	inley		
Full Name (Last, First, Middle Initial)				Tropos	otion ID:	390109			
3. Hoosiers Supporting Buyer For Congress				Date of	Disburse	ement			
Mailing Address 200 North Main St. P.0	). Box 712			0 <sup>M</sup> 5 M	<sup>/</sup> 1	<sup>D</sup> 4	ž	0 ŏ 7	Y
City Monticello	State Zip Code IN 47960			Amount	of Each	Disburse			
Purpose of Disbursement check sent to Dr. Ray Maddox		011					. 2	500.0	0
Candidate Name Rep. Steve Buyer	L	Category/	1						
9 1	ement For: 2008  Primary General  Other (specify)			check s dox	ent to [	Or. Ray	Mad-	-	
Full Name (Last, First, Middle Initial)				Tranca	rtion ID:	390108	37		
Friends Of Dave Weldon					Disburse		,,		
Mailing Address 2525 Aurora Road Suite 2				0 <sup>M</sup> 5 M	/ D 1	<sup>D</sup> /	ž	0 ŏ 7	Y
City Melbourne	State Zip Code FL 32935			Amount	of Each	Disburse	ement	this P	eriod
Purpose of Disbursement FL event 5/25/07-check sent to Dr. Geral		011	1				. 1	0.00	0
Candidate Name Rep. Dave Weldon, M.D.		Category/ Type	1						
0 2.	ement For: 2008  Primary General  Other (specify)			FL ever			k se-	-	
SUBTOTAL of Disbursements This Page (optional			<b>&gt;</b>				85	500.0	0
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	y Information copied from such Reports and Statem or commercial purposes, other than using the name										s
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full)  American Dental Political Action Committee		33 of any political		THREE TO SE	JIOIL COITE	ibutions ii	om suom c		iiiioo	
<u>/</u>						ı					
۹.	Full Name (Last, First, Middle Initial) Norm Dicks For Congress Committee					Date	of Disburs	ement			V
	Mailing Address PO Box 1663					0 <sup>M</sup> 5		7 /	2	0 ŏ 7	
		State WA	Zip Code 98401			Amou	int of Each	Disburse	-	-	-
	Purpose of Disbursement Judy Sherman attended event/check sent t			_	011		0 0		1	0.000	00
	Candidate Name Norman Dicks				ategory/ Type	-					
	Senate President X	ement For: Primary Other (spe	2007 General			Judy int/che	Shermar eck sent	attende to campa	d ev aign	/e-	
_	Full Name (Last, First, Middle Initial)	5 General				Trans	action ID	: 391082	0		
э.	Committee For Pete V. Domenici						of Disburs	ement	/ ° Y	ν.	Y
	Mailing Address PO Box 93656					0 5		17 /	2	0 ŏ 7	
	,	State NM	Zip Code 87199			Amou	int of Each	n Disburse	-		-
	Purpose of Disbursement Warner Classic 2007				011		-		1	500.0	00
	Candidate Name Pete Domenici				ategory/ Type	-					
	° 🗎 –	ment For: Primary Other (spe	2008 General			Warn	er Classi	c 2007			
). D.	Full Name (Last, First, Middle Initial) Enzi For U.S. Senate Committee						action ID		9		
	Mailing Address PO Box 2775							D / Y	Ž	0 ŏ 7	, <sup>Y</sup>
	City	State	Zip Code			Amou	int of Each	Disburse	men	t this F	Period
	Purpose of Disbursement	WY	82414						2	000.0	00
	Warner Classic 2007 Candidate Name Michael Enzi			Ca	011 ategory/ Type						
	, <u> </u>	ment For: Primary Other (spe	2008 General cify) ♥			Warn	er Classi	ic 2007			
s	UBTOTAL of Disbursements This Page (optional) .				▶				4	500.C	00
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SCHEDULE B (FEC Form 3X)	Use seperate schedule(s)	FOR LINE		PAGE 27/39
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NAME OF COMMITTEE (In Full)	and address of any pointed of		on commodicine from	1 ddoir dominiadd
American Dental Political Action Committee	•			
Full Name (Last, First, Middle Initial)  4. Lindsey Graham for U.S. Senate			Transaction ID: 3 Date of Disbursem	
			0 5 1 7	
Mailing Address PO Box 1155			0.5	2007
,	State Zip Code SC 29679		Amount of Each D	isbursement this Period
Purpose of Disbursement Warner Classic 2007		011		2500.00
Candidate Name Lindsey Graham		Category/ Type		
	Primary General Other (specify) ▼		Warner Classic	2007
	General			
Full Name (Last, First, Middle Initial)  Tim Johnson For South Dakota, Inc.			Transaction ID: 3 Date of Disbursem	nent
Mailing Address PO Box 1859			05 17	$\overset{\circ}{2}$ $\overset{\circ}{2}$ $\overset{\circ}{0}$ $\overset{\circ}{0}$ $\overset{\circ}{7}$
,	State Zip Code SD 57101		Amount of Each D	isbursement this Period
Purpose of Disbursement Judy Sherman attended event/check sent t		011		1000.00
Candidate Name Tim Johnson		Category/ Type		
Office Sought:    House   Disburse   X	nent For: 2008 Primary General Other (specify)		Judy Sherman a nt/check sent to	ittended eve- campaign
Full Name (Last, First, Middle Initial)			Transaction ID: 3	Q10823
Friends Of Senator Carl Levin			Date of Disbursem	nent
Mailing Address 10 G Street Ne, Suite 470			05 17	2 0 0 7
	State Zip Code DC 20002		Amount of Each D	isbursement this Period
Purpose of Disbursement check sent to Kris Nicholoff-will attend		011		1000.00
Candidate Name Sen. Carl Levin		Category/ Type		
President	nent For: 2008 Primary General Other (specify)		check sent to Kr off-will attend MI	is Nichol- I event
State: MI District: 1				
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S	CHEDULE B (FEC Form 3X)	Use sepe	erate schedule(s)			_		NUMBE	R:			F	PAGE	28 /	39
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	y Information copied from such Reports and Stat for commercial purposes, other than using the na														1S
$\vdash$	NAME OF COMMITTEE (In Full)		71								_				
$ \rangle$	American Dental Political Action Commi	ttee													
Α.	Full Name (Last, First, Middle Initial) Senator John Warner Cmte							Trans		-			15		
								М	_		1 7		Y	2 0 Ď	Y
	Mailing Address PO Box 3536							0 5		L	1 /			200	
	City Merrifield	State VA	Zip Code 22116					Amou	int o	f Eacl	ı Di	sburs	semer	nt this	Period
	Purpose of Disbursement Warner Classic 2007			Г	0	11	7	L.	-				;	3000.	00
	Candidate Name John Warner			С	at	egory/ ype									
		rsement For: X Primary Other (spe	2008 General			71		Warn	er (	Class	ic 2	2007			
	State: VA District: 1														
В.	Full Name (Last, First, Middle Initial) Heather Wilson For Congress							Trans Date		on ID			07		
	Mailing Address P.O. Box 14070							0 <sup>M</sup> 5	М	/ D	1 7	/	Y	0 0	7 <sup>Y</sup>
	City Albuquerque	State NM	Zip Code 87191					Amou	ınt o	f Eacl	ը Di	sburs	semer	nt this	Period
	Purpose of Disbursement Katie Yehl attended event/check sent to	INIVI	0/191	Г	_		7							1000.	00
	Candidate Name Rep. Heather A. Wilson			С	at	11 egory ype	_								
	Office Sought: X House Disbut	rsement For: X Primary Other (spe	2008 General			,,,,		Katie /chec						-	
	State: NM District: 1														
C.	Full Name (Last, First, Middle Initial) Committee For Thad Cochran							Trans Date					17		
	Mailing Address PO Box 7183							0 <sup>M</sup> 5	М	/ D	1 7	′	Y	0 0	7 <sup>Y</sup>
	City Tupelo	State MS	Zip Code 38801					Amou	ınt o	f Eacl	າ Di	sburs	semer	nt this	Period
	Purpose of Disbursement Warner Classic 2007			Г		11	7	L.					. :	2000.	00
	Candidate Name Thad Cochran				at	egory/ ype									
	9 🗎	rsement For: X Primary Other (spe	2008 General			<u> </u>		Warn	er (	Class	ic 2	2007			
<u> </u>		n								•	_	•	-	000.	00
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	CHEDULE B (FEC Form 3X)	Use seperate schedule(s	5)	FOR LIN	E NUMBER:	PAGE 29/39	9
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 X 23 28a 28b	24 25 28c 29	26 30b
	y Information copied from such Reports and St for commercial purposes, other than using the						j
	NAME OF COMMITTEE (In Full)  American Dental Political Action Comm						
Α.	Full Name (Last, First, Middle Initial) Chambliss For Senate				Transaction ID: 3 Date of Disbursen		
	Mailing Address Post Office Box 1246	9			05 7 1 7	7 2007	Y
	City Atlanta	State Zip Code GA 30355			Amount of Each D	Disbursement this Pe	-
	Purpose of Disbursement Warner Classic 2007		_	011		2000.0	0
	Candidate Name Saxby Chambliss  Office Sought: X House Disb	ursement For: 2008		tegory/ Type			
	Senate President State: GA District: 1	X Primary General Other (specify) ▼			Warner Classic	2007	
В.	Full Name (Last, First, Middle Initial) Pat Roberts For Senate				Transaction ID: 3		
	Mailing Address PO Box 433				05 7 1 7	7 2007	Y
	City Great Bend	State Zip Code KS 67530			Amount of Each D	Disbursement this Pe	-
	Purpose of Disbursement Warner Classic 2007 Candidate Name			011		1000.0	0
	Sen. Pat Roberts			itegory/ Type			
	Office Sought:  House X Senate President  State: KS  District: 2	ursement For: 2008  X Primary General Other (specify)			Warner Classic	2007	
C.	Full Name (Last, First, Middle Initial) Norm Coleman for US Senate				Transaction ID: 3 Date of Disbursen	nent	
	Mailing Address 1410 Energy Park Ro				05 7 17	7 2007	Y
	City St. Paul	State Zip Code MN 55108			Amount of Each D	Disbursement this Pe	-
	Purpose of Disbursement Warner Classic 2007			011		1000.0	0
	Candidate Name Norm Coleman			itegory/ Γype			
	X Senate President	ursement For: 2008  X Primary General  Other (specify) ▼			Warner Classic	2007	
	State: MN District: 2  UBTOTAL of Disbursements This Page (option	nal)				4000.0	0
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Any Information copied from such Reports and State or for commercial purposes, other than using the nare								
NAME OF COMMITTEE (In Full)	le and address of any political co	on in the los	SOIICIL COLILLIDI		III SUCII (	JOHIH	iee	
American Dental Political Action Commit	ee							
Full Name (Last, First, Middle Initial)			Transac	ction ID:	391080	3		
Thelma Drake For Congress				Disburse				
Mailing Address P.O. Box 61480			0.5	/ <b>1</b>	7	žo	ŏ7 <sup>°</sup>	
City	State Zip Code		Amount	of Each I	Disburse	ement t	nis Per	riod
Virginia Beach	VA 23466				-	25	00.00	
Purpose of Disbursement check sent to Dr. Terry Dickinson	IΓ	011					00.00	
Candidate Name Rep. Thelma D. Drake	-	Category/ Type						
	ement For: 2008	Турс	┨		_			
	C Primary General Other (specify) ▼		check s Dickins	ent to D on	r. Terry	/		
State: VA District: 2	Other (specify)							
Full Name (Last, First, Middle Initial)			Transac	ction ID:	391080	)5		
3. Ameripac				Disburse	ment		V ° V	1
Mailing Address 499 South Capitol, SW Suite 414			0 5	/ <b>1</b>	7 '	20	ŏ7 <sup>°</sup>	
City Washington	State Zip Code DC 20003		Amount	of Each I	Disburse	ement ti	nis Per	riod
Purpose of Disbursement	Г	• •				25	00.00	
Katie Yehl attended event/check to PAC		011						
Candidate Name	'	Category/ Type						
Senate President	ement For: Primary General Other (specify)		Katie Y	ehl atter to PAC	nded ev	ent-		
State: District: Full Name (Last, First, Middle Initial)						_		
Eric PAC				ction ID: ( Disburse		18		
Mailing Address 209 Pennsylvania Aven	ue, SE		05	/ <b>1</b>	7 /	ž0	ŏ7 <sup>°</sup>	
City Washington	State Zip Code DC 20003		Amount	of Each I	Disburse	ement t	nis Per	riod
Purpose of Disbursement Mike Graham attended event/check sent to	Г	011				50	00.00	
Candidate Name		011 Category/ Type						
Office Sought: House Senate President State: District:	ement For:  Primary General  Other (specify) ▼		Mike Gi t/check	raham a sent to	ittended PAC	d even	-	
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$ \rangle$	NAME OF COMMITTEE (In Full)  American Dental Political Action Committee												
$\angle$	American Denial Folitical Action Committee	:e											
Α.	Full Name (Last, First, Middle Initial)								ion ID:				
Α.	Mike Pence Committee								isburse			V	V
	Mailing Address P. O. Box 408						0 5	IVI	1	8	′ <u> </u>	ž 0 ŏ	7 '
	City	State Zip C					Amo	unt o	f Each	Disb	urseme	ent this	Period
	Anderson	IN 460	15					-				2500	00
	Purpose of Disbursement check sent to Dr. Ray Maddox				0-	11						2500	.00
	Candidate Name				_	gory/							
	Rep. Michael R. Pence					pe							
	X		2008				checl	k se	nt to I	Dr. F	Ray Ma	ıd-	
	Senate X President	Primary Other (specify)	General				dox				•		
	State: IN District: 6	Carlor (opeony)	•										
_	Full Name (Last, First, Middle Initial)						Trans	sact	ion ID:	: 391	1105		
В.	Rely on Your Beliefs Fund								isburse	emen			
	Mailing Address 209 Pennsylvania Ave, S	E					0 <sup>M</sup> 5	М	1	8	/ Y	žoŏ	7 <sup>Y</sup>
	City	State Zip C	Code				Amo	unt o	f Each	Disb	urseme	ent this	Period
	Washington	DC 200	03						-			0500	00
	Purpose of Disbursement Mike Graham attended event/check sent to				0-	14	L.					2500	.00
	Candidate Name				-	gory/							
						pe							
		ement For:					Mike	Gra	ham	atter	ided e	ven-	
	Senate	Primary	General				t/che	ck s	ent to	PA(	5	V 011	
	President State: District:	Other (specify)	•										
_	Full Name (Last, First, Middle Initial)						Trans	eact	ion ID:	. 301	1104		
C.	Alliance for The West								isburs				
	Mailing Address 1006 Pendleton Street						0 <sup>M</sup> 5	М	/ D 1	1 8	/ Y	ž 0 ŏ	7 <sup>Y</sup>
	1000 T endleton Street												
	City Alexandria	State Zip C VA 223					Amo	unt o	f Each	Disb	urseme	ent this	Period
	Purpose of Disbursement	VA 223	1		_							1000	.00
	Judy Sherman attended event/check sent t				Ō-	11							
	Candidate Name					gory/ pe							
	Office Sought: House Disburse	ment For:					Judy	Sha	ırman	n atte	nded :	9V <b>6</b> -	
	Senate	Primary	General				nt/ch	eck	sent t	to PA	ended ( AC		
	President State: District:	Other (specify)	7										
Г	oldio. District.							_					
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$ \rangle$	NAME OF COMMITTEE (In Full)  American Dental Political Action Committee	20										
Z	American Dental Political Action Committee	;e 										
Α.	Full Name (Last, First, Middle Initial)									1432		
Λ.	Tiberi For Congress						of Di	isburs			y y	Υ
	Mailing Address 2021 E Dublin Granville Suite 2000	Road				0 5		2	2 <sup>D</sup>		žoó	7
	City Columbus	State Zip Code OH 43229				Amou	ınt o	f Each	n Disb	urseme	nt this	Period
	Purpose of Disbursement	UH 43229	_								3000.	00
	check sent to Dr. Dennis Burns-June 1st			Ö	11						•	
	Candidate Name Rep. Patrick J. Tiberi				egory/ /pe							
	Senate X President	ement For: 2008 Primary General Other (specify)	•							ennis io ever	nt	
	State: OH District: 12 Full Name (Last, First, Middle Initial)					_						
В.	Keller For Congress					Date		isburs	emen		V * V *	V
	Mailing Address P.O. Box 1453					0 5	IVI	້	23	′ L'.:	ž 0 ŏ	7 '
	City Orlando	State Zip Code FL 32802				Amou	ınt o	f Each	n Disb	urseme		
	Purpose of Disbursement Jennifer Fisher attended event/check sen		_	-	11	L.		•			1000.	00
	Candidate Name Rep. Richard A. Keller				egory/ /pe							
	Senate X President	ement For: 2008 Primary General Other (specify)				Jenni event ign				ended camp	a-	
	State: FL District: 8											
C.	Full Name (Last, First, Middle Initial) Maloney For Congress							on ID:		1580 t		
	Mailing Address 49 East 92nd Street					0 5	М	<sup>/</sup> 2	23	/ Y	ž 0 ŏ :	7 <sup>Y</sup>
	City New York	State Zip Code NY 10128				Amou	ınt o	f Each	Disb	urseme	nt this	Period
	Purpose of Disbursement Jennifer Fisher attended event/check sen			0	11	<u> </u>					1000.	00
	Candidate Name Rep. Carolyn B. Maloney				egory/ vpe							
	Senate X President	ement For: 2008 Primary General Other (specify)	•			Jenni event ign				ended camp	a-	
	State: NY District: 14									-	-000	00
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	y Information copied from such Reports and Stater													s
or	for commercial purposes, other than using the name	ne and address of any politica	al com	ım	ittee t	o solic	it contr	ibuti	ions fr	om s	such c	omm	nittee	
	NAME OF COMMITTEE (In Full)													
	American Dental Political Action Committee	ee												
Α.	Full Name (Last, First, Middle Initial)										11576	6		
Λ.	David Scott For Congress						1111	of Di	isburs		nt / Ty	Y	Y	Υ
	Mailing Address 162 Hurt Street Ne						0 5		2	23	L	2	o ŏ 7	7
	City	State Zip Code					Amou	int o	f Each	ı Dis	burser	ment	this I	Period
	Atlanta Purpose of Disbursement	GA 30307										5	000.	00
	check sent to Dr. Gordon Austin			0	11									
	Candidate Name Rep. David A. Scott				egory/ ype									
	X	ement For: 2008					check	Sel	nt to l	Dr (	Gordo	on		
	Senate X President	C Primary General Other (specify) ▼					Austir				0.0.0.	•		
	State: GA District: 13	_ Curior (Specify) •												
_	Full Name (Last, First, Middle Initial)						Trans	acti	on ID:	: 39	11575	5		
В.	Pete Sessions For Congress 2008							_	isburs		nt			
	Mailing Address Post Office Box 38585						o <sup>M</sup> 5	М	<sup>/</sup> 2	2 3	/ L	ž	0 ŏ 7	7 <sup>Y</sup>
	City Dallas	State Zip Code TX 75238					Amou	int o	f Each	ı Dis	burser	ment	this I	Period
	Purpose of Disbursement	7,0200		_	_	_						1	000.	00
	Mike Graham attended event/check sent to		_		11									
	Candidate Name Rep. Pete Sessions				egory/ ype									
	X X	ement For: 2008	!		··		Mike	Gra	ham	atte	nded	eve	n-	
		Char (analify) General					t/chec						<b>,</b> 11	
	State: TX President  District: 32	Other (specify) ▼												
С.	Full Name (Last, First, Middle Initial) Kenny Marchant For Congress										11579	9		
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	Mailing Address PO Box 110187						0 5		2	23	L	2	0 ŏ 7	7
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NAME OF COMMITTEE (In Full)											
American Dental Political Action Comm	ittee										
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Full Name (Last, First, Middle Initial)				Tran	sact	ion ID:	391158	36			
A. Blue Dog PAC				Date	of D	isburse	ement				
Mailing Address 236 Massachusetts A Ste 508	ve., NE			0 <sup>M</sup> 5	М	<sup>/</sup> 2	3 /	Ž	0 ŏ 7	Y	
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Friends of Mazie Hirono						isburse		0			
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Mailing Address PO Box 677				0.5		2	3	2	007		
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name										5
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١.	Full Name (Last, First, Middle Initial) Solidarity PAC					Date o	action ID	ement			
	Mailing Address 301 4th Street, NE					0 <sup>M</sup> 5	M / D	23 /	2 (	0 ŏ 7	
	,	State DC	Zip Code 20002			Amou	nt of Each	Disburse			
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	Candidate Name			Category Type	//						
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3.	State: District:  Full Name (Last, First, Middle Initial)  Committee For Daniel K. Akaka						action ID		58		
	Mailing Address 3125 Kaohinani Drive					0 <sup>M</sup> 5	M / D	24	ž	0 ŏ 7	Y
	,	State HI	Zip Code 96817			Amou	nt of Each	Disburse			
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Э.	Full Name (Last, First, Middle Initial) Andrews For Congress Committee					Date of	action ID of Disburs		59		
	Mailing Address 215 Fourth Avenue Suite 200					0 <sup>M</sup> 5	M / D	24	ž	0 ŏ 7	Y
	Haddon Heights	State NJ	Zip Code 08035			Amou	nt of Each	Disburse			
	Purpose of Disbursement check sent to Dr. Vincent C. Mayher  Candidate Name			011 Category					∠:	500.0	10
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name														S
$\vdash$	NAME OF COMMITTEE (In Full)														
$ \rangle$	American Dental Political Action Committee	е													
Α.	Full Name (Last, First, Middle Initial) Brian Baird For Congress							Trans Date			_		45		
	Mailing Address PO Box 5016							0 <sup>M</sup> 5	М	/	2 4	. /	Y	2 0 0 Z	7 <sup>Y</sup>
	City Vancouver	State WA	Zip Code 98668					Amou	ınt c	of Ea	ch D	isburs	semer	nt this	Period
	Purpose of Disbursement Jennifer Fisher attended event/check sen			Г	0	11	1							1500.	00
	Candidate Name Rep. Brian Baird				ate	egory/ vpe	1								
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_	State: WA District: 3 Full Name (Last, First, Middle Initial)							Trans	sact	ion I	<b>D</b> : 3	9118	44		
B.	Steve Rothman For New Jersey Inc.							Date		isbu	rsem	ent		2 0 ŏ 7	Y
	Mailing Address P.O. Box 714		7: 0 1					0.5	_		2 4		_		
	Hackensack	State NJ	Zip Code 07602					Amou	ınt c	of Ea	ch D	isburs		nt this 1	
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	9 1	ement For: Primary Other (spec	2008 General					Judy nt/che	She eck	erma sen	an a t to	ttend camp	led e oaigr	ve-	
	State: NJ District: 9														
C.	Full Name (Last, First, Middle Initial) Mike Rogers For Congress							Trans Date	of D	isbu	rsem	ent			
	Mailing Address 123 East 13th Street							0 5	М	/ [	2 4	·	Ý 2	2 0 Ŏ	7
	Anniston	State AL	Zip Code 36201					Amou	ınt c	of Ea	ch D	isburs		nt this	
	Purpose of Disbursement check sent to Wayne McMahan				_	11								1000.	00
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American Dental Political Action Committee	e								
Full Name (Last, First, Middle Initial)			Transac	tion ID: 39131	162				
Henry E. Brown For Congress			Date of Disbursement						
Mailing Address 1035 Dominion Drive			0.5	30	20	0 7 °			
City	State Zip Code		Amount	of Each Disbur	sement th	is Period			
Hanahan Purpose of Disbursement	SC 29406		-		100	00.00			
Sent to Phil Latham		011							
Candidate Name Henry Brown	C	Category/ Type							
X	ement For: 2008 Primary General Other (specify)		Sent to Phil Latham						
Full Name (Last, First, Middle Initial)			Tuanaaa	Ham ID: 00146	270		_		
3. Doggett for Congress				<b>tion ID:</b> 39146 Disbursement	0/8				
Mailing Address P.O. Box 5843				$\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & S & D \\ 3 & O \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & O & T \end{smallmatrix} \end{bmatrix}$					
City Austin	State Zip Code TX 78703		Amount of Each Disbursement this Period			1			
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Candidate Name Lloyd Doggett		Category/ Type							
ů 💢	ment For: 2008 Primary General Other (specify)		sent to Alan Moore						
Full Name (Last, First, Middle Initial)			Transac	tion ID: 39131	163		_		
Neugebauer Congressional Committee				Date of Disbursement					
Mailing Address P.O. Box 54175			05		y ž0	0 7 Y			
City Lubbock	State Zip Code TX 79453		Amount	of Each Disbur	sement th	is Period	1		
Purpose of Disbursement sent to Jay Adkins		011	<u> </u>		100	00.00			
Candidate Name Rep. Robert R. Neugebauer		Category/ Type							
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NAME OF COMMITTEE (In Full)  American Dental Political Action Committee							
Full Name (Last, First, Middle Initial) Coleman For Senate 08			Transaction ID: 3912879 Date of Disbursement				
Mailing Address 7300 Hudson Blvd Suite	270a		05	0 7 2007			
City St Paul	State Zip Code MN 55128		Amount of Each I	Disbursement this Period			
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Sen. Norm Coleman	ement For: 2008	Type					
	Primary General Other (specify) ▼						
Full Name (Last, First, Middle Initial)  3. Doggett for Congress			Transaction ID: (				
Mailing Address P.O. Box 5843			05	1 2007			
City Austin	State Zip Code TX 78703		Amount of Each I	Disbursement this Period			
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City Austin	State Zip Code TX 78703		Amount of Each [	Disbursement this Period 2000.00			
Purpose of Disbursement Sent to Alan Moore Candidate Name  011 Category/				2000:00			
Lloyd Doggett  Office Sought: X House Disburs	ement For: 2008	Type	Sent to Alan Mo	ooro			
Senate President State: TX District: 25	Primary General Other (specify) ▼		Sent to Alan Mic	oore			
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